

TITLE: CHILD WELFARE MANUAL
SECTION 6: RESOURCE DEVELOPMENT
CHAPTER 7: CHILDREN'S SERVICES FAIR HEARING
ATTACHMENT D: COUNTY DIRECTOR/DESIGNEE ALTERNATIVE CARE
REVIEW BOARD SUMMARY OUTLINE
EFFECTIVE DATE:
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Area Alternative Care Review Board Summary Outline

When the County Director/Designee receives notification that the alternative care parent has made a request to the Area Alternative Care Review Board (AACRB) for a review of a child management decision, this outline should be used to provide a summary of the pertinent information. The summary, as well as a copy of the child's case record(s) and any other supporting documentation, must be sent to the Area ACRB Liaison within five (5) working days of notification that the alternative care parent has requested a formal review.

1. Identifying Child Data: The child's name, race, and date of birth.
2. Identifying Alternative Care Parent Data: The alternative care parent's name, family members also involved in grievance decision, etc.
3. Summary of the Child's Placement in Alternative Care: Include a summary of the case, i.e., the reason for placement, a summary of all previous placement, the length of time in this placement, and describe the care provided in this home.
4. Reason For The Alternative Care Review Board Hearing: Summarize the reason the alternative care parent requested a review.
5. Basis For Case Management Decision: Summarize the basis for the case management decision and cite the policy or rule on which the decision is based.
6. Relationship of the Case Management Decision to the Child's Treatment Plan: Describe how the case management decision in this case relates to the child's treatment plan.
7. Steps Taken at County Level to Remedy the Case Management Disagreement: Include the reason a solution was not reached at the county or area level.
8. Family Support Team (FST) Recommendation(s): Summarize the FST recommendations(s) for the child, especially if the team's recommendation(s) impacts on the case management decision.

MEMORANDA HISTORY: